California Mental Health Planning Council

Executive Committee Friday, December 15, 2017 10:00a.m. to 11:30 a.m.

*1000 G Street, 4th Floor Suite 450 Sacramento, CA 95814

Time	Topic	Presenter or Facilitator	Tab
10:00	Welcome and Introductions	Susan Wilson, Chairperson	
10:05	Discuss Possible Areas of Priority	Susan Wilson	1
10:45	Decide Length of Time	Susan Wilson	2
10:55	Discuss Change in Committee Structure to follow Priorities	Susan Wilson	3
11:20	Public Comment	Susan Wilson	
11:25	New Business	All	
11:30	Adjourn		_

The scheduled times on the agenda are estimates and subject to change. * If you are unable to attend in person, call in capability is available by dialing 1-866-742-8921 then code 5900167.

Executive members					
Officer Team	Susan Wilson, Chairperson	Raja Mitry, Chair-Elect	Vacant, Past Chair	Jane Adcock, Exec Officer	
Advocacy Cmte	Barbara Mitchell	Monica Wilson			
EQI Cmte	Walter Shwe	Esmeralda Liberato			
HCI Cmte	Robert Blackford	Deborah Pitts			
Patients' Rights	Daphne Shaw	Walter Shwe			
Liaisons	Daphne Shaw, CCMH	Susan Wilson, CALBHB/C	Noel O'Neill, CBHDA	Kimberly Wimberly, DHCS	
At Large	Arden Tucker, Consumer	Lorraine Flores, Family Member			
CMHPC Staff	Jenny Donaldson, Chief Of Operations	Dorinda Wiseman, Deputy Exec Ofcr			

__1__ TAB SECTION

DATE OF MEETING 12/15/17

MATERIAL DATE MATERIAL
PREPARED BY: Adcock PREPARED 11/28/17

AGENDA ITEM:	Discuss Possible Areas of Priority
ENCLOSURES:	How to Fix the Health Care System and Create Healthy Communities

BACKGROUND/DESCRIPTION:

At the October 2017 Executive Committee meeting, members decided to select 2-3 areas of priority for the Council to research, analyze and present recommendations and/or take action over a specified period of time. The Executive Committee also agreed to hold a meeting in December 2017 to discuss/decide on priorities, length of time and to discuss/decide whether the reorganize committees around the priorities.

The priorities would be segments of or issues in the public behavioral health system that the Council would like to effect change. While the priority may be broad such as those presented below, specific objectives also must be identified to define tangible goals, guide the work, maintain focus, and culminate in results.

Based on work currently underway at the Council, there are 2 areas that must be considered as potential priorities:

- Behavioral Health Workforce Shortage
- Housing/Homelessness Needs

Additionally possibilities include:

- SAMHSA/Mental Health Block Grant (or this can be a regular part of General Session for all members to participate)
- Exploration of healthy communities that provide whole person care and that serve as diversion programs (See attached PowerPoint) https://docs.google.com/viewer?a=v&pid=sites&srcid=ZGpjb25zdWx0Lm5ldHx3d 3d8Z3g6NmM3MGQ5ZDhhMjlzYjBhMg

- Older adults and the aging of California (can be an objective under Workforce)
- Public Mental Health financing, the 2020 cliff
- Multi-System populations (child welfare, criminal/juvenile justice, special education)

__2_ TAB SECTION

DATE OF MEETING 12/15/17

MATERIAL DATE MATERIAL
PREPARED BY: Adcock PREPARED 11/28/17

AGENDA ITEM:	Decide length of time to focus on the Priorities
ENCLOSURES:	

BACKGROUND/DESCRIPTION:

At the October 2017 Executive Committee meeting, members decided to select 2-3 areas of priority for the Council to research, analyze and present recommendations and/or take action over a specified period of time.

Is 1 year sufficient time to perform the research, analysis and discussion needed to effect change on a priority? (Each priority can be considered separately)

Are 2 years sufficient time?

Are 3 years sufficient?

Are 4 years needed?

<u>3</u> TAB SECTION

DATE OF MEETING 12/15/17

MATERIAL DATE MATERIAL
PREPARED BY: Adcock PREPARED 11/28/17

AGENDA ITEM:	Discuss Change in Committee Structure to follow Priorities
ENCLOSURES:	

BACKGROUND/DESCRIPTION:

The Executive Committee is to discuss and decide whether to restructure the current committees (*Patients' Rights, Evaluation and Quality Improvement, Advocacy and Health Care Integration) into new committees around the priorities. And if so, should there be changes to the current quarterly Council meeting format.

*Welfare and Institutions Code Section 5514 requires the Council to have a Patients' Rights Committee, its membership and its responsibilities. So, the Council must maintain this committee as is.

Yes or No, shall existing committees be changed to support the priorities?

Yes or No, shall the quarterly meeting structure be changed to accommodate the change in committees?

If yes to either committee, the detail will be discussed and decided at the January 2018 Executive Committee meeting.